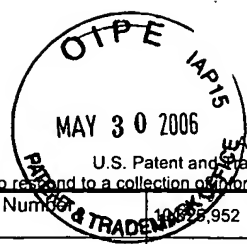


copy ✓



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	6,919,638
	Filing Date	JULY 23, 2003
	First Named Inventor	YING HUANG ET AL.
	Art Unit	2815
	Examiner Name	JOSEPH H. NGUYEN
Total Number of Pages in This Submission	Attorney Docket Number	MI22-2347

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	CHECK: PTO RETURN RECEIPT POSTCARD; REQUEST FOR CERTIFICATE OF CORRECTION; CERTIFICATE OF CORRECTION (2)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

PATENT NO. 6,919,638 B2 ISSUED: JULY 19, 2005

Certificate  
JUN 01 2006

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	WELLS ST. JOHN P.S. (Customer No. 021567)	
Signature		
Printed name	D. BRENT KENADY	
Date	5-25-06	Reg. No. 40,045

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature	NATALIE KING	
Typed or printed name		Date 5/25/06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

JUN 01 2006



Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 100.00

## Complete if Known

Application Number 10/625,952  
Filing Date JULY 23, 2003  
First Named Inventor YING HUANG ET AL.  
Examiner Name JOSEPH H. NGUYEN  
Art Unit 2815  
Attorney Docket No. MI22-2347

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 23-0925 Deposit Account Name: WELLS ST. JOHN P.S.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 (including Reissues)

Fee (\$)  
50

Small Entity Fee (\$)  
25

Each independent claim over 3 (including Reissues)

200

100

Multiple dependent claims

360

180

Total Claims Extra Claims Fee (\$)

- 20 or HP = x = Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$)

- 3 or HP = x = Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

- 100 = / 50 = (round up to a whole number) x = Fee Paid (\$)

### 4. OTHER FEE(S)


Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): REQUEST FOR CERTIFICATE OF CORRECTION

100.00

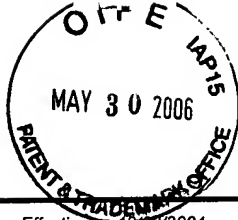
## SUBMITTED BY

Signature  Registration No. 40,045 Telephone 509-624-4276  
Name (Print/Type) D. BRENT KENADY Date 5-25-06

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

JUN 01 2006



<b>Effective on 12/08/2004.</b> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	10/625,952
		Filing Date	JULY 23, 2003
		First Named Inventor	YING HUANG ET AL.
		Examiner Name	JOSEPH H. NGUYEN
		Art Unit	2815
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	MI22-2347
<b>TOTAL AMOUNT OF PAYMENT</b> (\$)		100.00	

**METHOD OF PAYMENT (check all that apply)**

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 23-0925 Deposit Account Name: WELLS ST. JOHN P.S.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

**Total Claims** \_\_\_\_\_ **Extra Claims** \_\_\_\_\_ **Fee (\$)** \_\_\_\_\_ **Fee Paid (\$)** \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims** \_\_\_\_\_ **Extra Claims** \_\_\_\_\_ **Fee (\$)** \_\_\_\_\_ **Fee Paid (\$)** \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____	_____

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): <u>REQUEST FOR CERTIFICATE OF CORRECTION</u>	100.00

<b>SUBMITTED BY</b>		
Signature		Registration No. (Attorney/Agent) 40,045
Name (Print/Type)	D. BRENT KENADY	Telephone 509-624-4276
		Date 5-25-06

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

JUN 01 2006



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent No ..... 6,919,638 B2  
Patent Issue Date ..... July 19, 2005  
Application Serial No. .... 10/625,952  
Filing Date ..... July 23, 2003  
Assignee ..... Micron Technology, Inc  
Inventorship ..... Ying Huang et al.  
Attorney's Docket No. .... MI22-2347  
Title: An Improved Method, Structure and Process Flow To Reduce Line-Line Capacitance  
With Low-K Material

**REQUEST FOR CERTIFICATE OF CORRECTION OF PATENT FOR  
APPLICANT MISTAKES and PTO MISTAKES (37 C.F.R. §§ 1.322(a) and 1.323)**

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
ATTN: ecision and Certificate of Correction  
Branch of the Patent Issue Division  
  
From: D. Brent Kenady (Tel. 509-624-4276; Fax 509-838-3424)  
Wells St. John P.S.  
601 W. First Avenue, Suite 1300  
Spokane, WA 99201-3828

Sir:

It is hereby requested that a Certificate of Correction be issued with respect to Patent No. 6,919,638 B2, granted July 19, 2005, in accordance with the Certificate of Correction form attached hereto in duplicate.

It is noted that errors appear in this patent of a typographical nature of character, as more fully described below. The errors occurred in good faith. Correction thereof does not involve such changes in the patent as would constitute new matter or would require re-examination.

Other errors listed on the Certificate of Correction form were apparently incurred through the fault of the PTO as will be disclosed by the records of files in the Office.

05/31/2006 SSITHIB2 00000044 6919638  
01 FC:1811

100.00 0P

JUN 01 2006

Attached hereto, in duplicate, is Form PTO-1050, with at least one copy being suitable for printing.

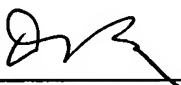
The exact page and line number where the errors occur in the application file are:

Page 17, lines 13 and 20.

Enclosed is a check in the amount of \$100.00, as required by 37 CFR 1.20(a).

Respectfully submitted,

Dated: 5-25-06

By:   
D. Brent Kenady  
Reg. No. 40,045

JUN 01 2006

UNITED STATES PATENT AND TRADEMARK OFFICE  
**CERTIFICATE OF CORRECTION**

PATENT NO. : 6,919,638 B2

DATED : July 19, 2005

INVENTOR(S) : Huang et al.

It is certified that errors appear in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

Title Page, in the Title, line 1, please insert --**AN IMPROVED**-- before "**METHOD**".

Col. 1, line 1, please insert --**AN IMPROVED**-- before "**METHOD**".

Col. 7, line 55, please delete "(TIE)" after "etch" and insert --(RIE)--.

Col. 9, line 54, please delete "**152**" after "region" and insert --**152**--.

Col. 9, line 64, please delete "analogus" after "or" and insert --analogous--.

Page  
1 of 1

**Mailing Address of Sender:**  
D. Brent Kenady  
Wells St. John P.S.  
601 West First Avenue, Suite 1300  
Spokane, WA 99201-3828

Patent No. 6,919,638 B2

JUN 01 2006

UNITED STATES PATENT AND TRADEMARK OFFICE  
**CERTIFICATE OF CORRECTION**

PATENT NO. : 6,919,638 B2

DATED : July 19, 2005

INVENTOR(S) : Huang et al.

It is certified that errors appear in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

Title Page, in the Title, line 1, please insert --**AN IMPROVED**-- before "**METHOD**".

Col. 1, line 1, please insert --**AN IMPROVED**-- before "**METHOD**".

Col. 7, line 55, please delete "(TIE)" after "etch" and insert --(RIE)--.

Col. 9, line 54, please delete "**152**" after "region" and insert --**152**--.

Col. 9, line 64, please delete "analogus" after "or" and insert --analogous--.

Page  
1 of 1

**Mailing Address of Sender:**  
D. Brent Kenady  
Wells St. John P.S.  
601 West First Avenue, Suite 1300  
Spokane, WA 99201-3828

Patent No. 6,919,638 B2